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|  |  |  | Odběratel: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | **Mikrobiologický ústav AV ČR, v.v.i.Vídeňská 1083142 20 PRAHA 4Česká republika** | PID: |  |  |  |  |
|  |  |  |  |  |  | Smlouva: |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | Číslo účtu: |  |  |  |  |
|  |  |  |  |  | Peněžní ústav: |  |  |  |  |
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|  |  |  |  |  |  | Dodavatel: |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | DIČ: | **CZ61388971** |  |  | IČ: | **16494563** | DIČ: |  |  |  |  |  |
|  |  |  |  |  | IČ: | **61388971** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | Konečný příjemce: |  |  |  |  |  |
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|  | **242188 TS - areál (náklady)** |
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| **Bc. Šimralová Petra** |
| **Tel.: , Fax: E-mail: simralova@biomed.cas.cz** |

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|  |  |  |  |  |  |  |  |  |  | **Platnost objednávky do:** | **31.12.2019** |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  | Termín dodání: | **27.05.2019** |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  | Forma úhrady: | **Příkazem** |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Způsob dopravy | : |  |

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| Dodací podmínky | : |  |

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|  |  |  | **Při fakturaci vždy uvádějte číslo objednávky.Žádáme Vás o vrácení potvrzené objednávky!** |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | Položkový rozpis: |  |  |
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|  |  |  | **Položka** |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  | **Množství** | **MJ** | **Cena/MJ vč. DPH** | **Celkem s DPH** |  |  |  |
|  |  |  | Objednáváme u Vás mytí oken v budově C dle Vaší nabídky |  |  |  |
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|  |  |  | **Celkem:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **67 300.00** | **Kč** |  |  |  |
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|  |  |  |  | ***Předpokládaná cena celkem:*** |  |  |  |  |

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|  |  | **Datum vystavení:** |  | 13.05.2019 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  | **Vystavil:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | Bc. Šimralová Petra | Razítko, podpis |  |  |  |
|  |  |  | Tel.: , Fax: E-mail: simralova@biomed.cas.cz |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Zpracováno systémem iFIS na databázi ORACLE (R) |  |